FORM D



365506

UNITED STATES RECEIVED SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 JAN 1 6 2007

OMB APPROVAL
OMB Number 3235-0076
Expires: April 30, 2008
Extimated average burden

hours per response...... 16.00

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D, 210

SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SE	C USE ONI	_Y
Prefix		Serial
DA	E RECEIV	ED

Name of Offering () check if this is an amount lssuance of Series C Preferred Stock	endment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply):	Rule 504 Rule 505 Rule 506	Section 4(6) ULOE
Type of Filing: New Filing Am	endment	PROCESSED
1. Enter the information requested about the iss	A. BASIC IDENTIFICATION DATA	**************************************
	ndment and name has changed, and indicate change.)	JAN 2 4 2007
Address of Executive Offices 150 California Street, Suite 1000, San Francis	(Number and Street, City, State, Zip Code)	Telephone Number (Inchion NSO) 415-263-3402 FINANCIAL
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business Online social networking		
Type of Business Organization corporation business trust	limited partnership, already formed	other (please specify):
Actual or Estimated Date of Incorporation or Or		Actual Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service Abbreviation for CN for Canada; FN for other foreign jurisdiction)	or State: D E

GENERAL INSTRUCTIONS

Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICAT	TION DATA				
2. Enter the information rec	uested for the fol	lowing:			
 Each promoter of the 	he issuer, if the is	suer has been organized wi	ithin the past five years;		
 Each beneficial ov securities of the iss 		power to vote or dispose	e, or direct the vote or d	isposition of, 10%	6 or more of a class of equity
 Each executive offi 	cer and director of	of corporate issuers and of	corporate general and mana	iging partners of p	artnership issuers; and
Each general and m	nanaging partner	of partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Conning, James	if individual)				
Business or Residence Addr 150 California Street, Suit			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Fernandes, Mark	if individual)				
Business or Residence Addr 2884 Sand Hill Road, Suite			de)	- · · · · · · · · · · · · · · · · · · ·	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Smith, Jed	if individual)				
Business or Residence Addr 400 Pacific Ave., 3rd Floor			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Verba, Jeremy	if individual)				
Business or Residence Addr 150 California Street, Suit			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, LeFlore, Jeanine	if individual)				
Business or Residence Addr 150 California Street, Suite	•	•	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Sherf, Michael J.	if individual)				
Business or Residence Addr 150 California Street, Suite	•		de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Remer, Paul	if individual)				
Business or Residence Addr 150 California Street, Suite			de)		

A. BASIC IDENTIFICAT	ION DATA				
2. Enter the information rec	uested for the foll	owing:			
 Each promoter of the 	he issuer, if the iss	uer has been organized wi	thin the past five years;		
 Each beneficial ov securities of the iss 		power to vote or dispose	, or direct the vote or di	sposition of, 10%	6 or more of a class of equity
 Each executive offi 	cer and director o	f corporate issuers and of c	corporate general and mana	ging partners of pa	artnership issuers; and
Each general and n	nanaging partner o	f partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, van Pruissen, Peter	if individual)				
Business or Residence Addi 150 California Street, Suit			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Sierra Ventures (and affili					
Business or Residence Addi 2884 Sand Hill Road, Suite			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Catamount Ventures (and	•	3)			
Business or Residence Address 400 Pacific Ave., 3rd Floor			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, US Venture Partners (and		s)			
Business or Residence Add 2735 Sand Hill Road, Men			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Matteucci, Paul	if individual)				
Business or Residence Add 2735 Sand Hill Road, Mer	•		de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)	, , , , , , , , , , , , , , , , , , ,		_	
Business or Residence Add	ress (Number and	Street, City, State, Zip Co.	de)		

								B.	INF	ORM/	TIO	N ABO	OUT OFFI	ERII	NG								
1. H	las th	ne iss	uer sol	ld, or	does t	he is	suer in	tend to sell	, to ne	on-acci	edite	d inves	tors in this	offe	ring?							Yes	No ⊠
				,				n Appendix							**							ப	لك
2. V	Vhat	is the	e minir	num				ill be accep											.,			\$0.00)
																						Yes	No
								of a single person wh															Ļ
s a d	imila ssoci lealer	r ren ated	nunerai person	tion f or a nan fi	or soli gent o ive (5)	citati f a br pers	ion of poker or	ourchasers in dealer reg	in cor istere	nection d with	n wit the S	h sales EC and	of securitions if or with a	s in state	the off or stat	ering es, li	g. If a p ist the n	erso ame	n to be of the	liste brok	d is an er or		
Full	Name	e (La	st nam	e firs	st, if in	divid	lual)																
Busin	ness	or Re	esidenc	e Ad	dress (Nun	nber an	d Street, Ci	ity, Si	ate, Zi	р Со	de)							_				
			ciated					· -					 						·····				
								or Intends													. [ام ا	1 States
		\ □	[AK]	_	[AZ]		[AR]	[CA]		[CO]		[CT]	DE)		[DC]		[FL]		[GA]		[HI]		[ID]
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	мтј		[NE]		[NV]		[NH]	[[נא]		[NM]		[NY]	□ [NC]		[ND]		[HO]		[OK]		[OR]		[PA]
	RIJ		[SC]		[SD]		[TN]	□ [TX]		[UT]		[VT]	□ [VA]		[WA]		[WV]		[WI]		[WY]		[PR]
Full	Nam	e (La	st nam	e firs	st, if in	divid	lual)		-				_										-
Busi	ness	or Re	esidenc	e Ad	ldress ((Nun	nber an	d Street, C	ity, Si	tate, Zi	p Co	de)											
Nam	e of	Asso	ciated	Brok	er or L	Deale	г																
State	s in '	Whic	h Pers	on L	isted H	las S	olicited	or Intends	to Sc	olicit P	urcha	sers				•					••		
	AL]		[AK]		[AZ]		[AR]	□ [CA]		[CO]		[CT]	□ [DE]		[DC]		[FL]		[GA]		[HI]		[ID]
□ (IL]		[IN]		[IA]		[KS]	☐ [KY]		[LA]		[ME]	☐ [MD]		[MA]		[Mi]		[MN]		[MS]		[MO]
□ 1	MT]		[NE]	· 🗀	[NV]		[NH]	ןנא] □		[NM]		[NY]	□ [NC]		[ND]		[OH]		[OK]		[OR]		[PA]
□ [RIJ		[SC]		[SD]		[TN]	□ [TX]		[UT]		[VT]	□ [VA]		[WA]		[WV]		[WI]		[WY]		[PR]
Full	Nam	e (La	ist nam	e fir:	st, if in	divid	lual)																
Duci	nacc	or D	ecidene	20 00	Idrocc	/Niun	nher an	d Street, C	ity S	tate Zi	n Co	de)					*						
								<u> </u>		tate, Zi										-	·		
Nam	e of	Asso	ciated	Brok	er or I	Deale	r																
State	es in	Whic	h Pers	on L	isted F	las S	olicited	or Intends	to S	olicit P	urcha	sers											
(Che	ck"	All S	tates"	or ch	eck in	divid	ual Sta	tes)													. [ll States
	ΛLJ		[AK]		[AZ]		[AR]	CA]		[CO]		[CT]	DE)		[DC]		[FL]		[GA]		[IHI]		[ID]
□i	IL)		[IN]		[IA]		[KS]	□ [KY]		[LA]			☐ [MD]		[MA]		[MI]		[MN]		[MS]		[MO]
	MT]		[NE]		[NV]		[NH]			[NM]		[NY]	☐ [NC]		[ND]		[OH]		[OK]		[OR]		[PA]
	Rij		[SC]		[SD]		[TN]	□ [TX]		[UT]		[VT]	□ [VA]		[WA]		[WV]		[WI]		[WY]		[PR]

(1) All solicitations in the United States (Connecticut, Illinois, Massachusetts and New York) were made by Dundee Securities Inc., the U.S. affiliate of Dundee Securities Corporation.

<u></u>	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF Enter the aggregate offering price of securities included in this offering and the total amount already sold.	PF	OCEEDS		
••	Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box				
	and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		A		A
	Type of Security	(Aggregate Offering Price		Amount Already Sold
	Debt	\$	0.00	\$	0.00
	Equity	\$	12,000,000.19	\$	11,000,000.01
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$	0.00	\$	0.00
	Partnership Interests	\$	0.00	\$	0.00
	Other (Specify:)	\$	0.00	\$	0.00
	Total			\$	11,000,000.01
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number Inyestors		Aggregate Pollar Amount of Purchases
	Accredited Investors	_	10	\$	11,000,000.01
	Non-Accredited Investors	_	0	\$	0.00
	Total (for filings under Rule 504 only)	_		\$	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		T	r	N. II A
	Type of Offering		Type of Security	L	Oollar Amount Sold
	Rule 505	•	N/A	\$	0.00
	Regulation A	_	N/A	\$	0.00
	Rule 504	_	N/A	\$	0.00
	Total	_	N/A	\$	0.00
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	
	Printing and Engraving Costs			\$	
	Legal Fees	. ,	X	\$	30,000.00
	Accounting Fees			\$	
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)			\$	
	Other Expenses (identify)			\$	
	Total			\$	30,000.00

_	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AN	ND U	SE OF PROCEEI	os	
5.	 b. Enter the difference between the aggregate offering price given in response to Part C – Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b 			\$	11,970,000.19
	above.		Payment to Officers, Directors, & Affiliates		Payments to Others
	Salaries and fees		\$		\$
	Purchase of real estate		\$		\$
	Purchase, rental or leasing and installation of machinery and equipment		\$		\$
	Construction or leasing of plant buildings and facilities		\$		\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$		\$
	Repayment of indebtedness		\$		\$
	Working capital:		\$	\boxtimes	\$ 11,970,000.19
	Other (specify):		\$		\$
			\$		\$
	Column Totals		\$		\$
	Total Payments Listed (column totals added)		⊠ \$	11,97	0,000.19
	D. FEDERAL SIGNATURE				
sig:	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If the nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of source (Print or Type)	ommi Rule	ission, upon writter	Rule 505 request	5, the following of its staff, the
	Piczo, Inc.		1-3-	- 0	7
<u>_</u>	Hame of Signer (Print or Type) Title of Signer (Print or Type) SERVING AND VICE	PRE	FARANT FA	ANCE	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE S	GNATURI	E			
						Yes	No
1.	Is any party described in 17 CFR 230.262 presently	subject to any of th	e disqualific	cation provisio	ons of such rule?		\boxtimes
	. See Appen	dix, Column 5, for s	state respons	e.			
2.	The undersigned issuer hereby undertakes to furnis Form D (17 CFR 239.500) at such times as require	•	istrator of a	ny state in whi	ch this notice is filed, a noti	ce on	
3.	The undersigned issuer hereby undertakes to furnis issuer to offerees.	h to the state admini	strators, upo	on written requ	est, information furnished b	y the	
4,	The undersigned issuer represents that the issuer is Limited Offering Exemption (ULOE) of the state is of this exemption has the burden of establishing that	n which this notice is	s filed and u	nderstands tha			
	The issuer has read this notification and knows the coduly authorized person.	ntents to be true and	has duly ca	used this notic	e to be signed on its behalf t	y the und	lersigned
I	ssuer (Print or Type)	natur			Date		
F	Piczo, Inc.	RE		_	1-3-07		
	Name (Print or Type)	(Print or Type)					
7	BETTLUAN PRINTEN SE	CRETARY	and	Vice-	PRESIDENT FINA	N(E	

Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				API	PENDIX				
1	To non-a	to sell accredited is in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of amount pu (Part		Disquali Under Sta (if yes, explana waiver g (Part E-	fication ate ULOE attach ation of granted)	
State	Yes	Yes No		Number of Accredited Investors	Amount	Amount	Yes	No	
AL_					,				
ΛK									
AZ									
AR		· · · · · · · · · · · · · · · · · · ·							
CA		X	Series C Preferred Stock - \$12,000,000,19	7	\$9,799,998.61	0	\$0.00		Х
со									
СТ									
DE									
DC									
FL									
	 								
GA	 	 					•	 	
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IN		<u> </u>							
IA		1							— —
KS		<u> </u>						ļ	
KY		<u> </u>							

				APP	ENDIX		· -		
1	Intend To non-a investors	Type of security tend to sell on-accredited stors in State rt B-ltem 1) Type of security and aggregate offering price Type of investor and amount purchased in State (Part C-Item 1) (Part C-Item 2)							5 ification ate ULOE , attach ation of granted) -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
LA								-	
МЕ					<u></u>				
MD								ļ	
MA									
Ml									
MN					•				
MS									
МО					_				
MT	<u> </u>						··		
NE	<u> </u>								
NV	ļ					<u> </u>			ļ
NH	ļ						.		<u> </u>
ŊJ	ļ <u>. </u>								<u> </u>
NM								<u> </u>	<u> </u>
NY		Х	Series C Preferred Stock - \$12,000,000.19	2	\$200,001.18	0	\$0.00		x
NC									

				APP	ENDIX				
1	Intend To non-a	Type of security Intend to sell on non-accredited offering price offered in state (Part B-Item 1) Type of security and aggregate Type of investor and amount purchased in State (Part C-Item 1) (Part C-Item 2)						Disqual Under Sta (if yes, explana waiver (fication ate ULOE attach ation of granted)
State	Yes	No _		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
ND									
ОН				:					_
ОК									
OR									
PA							_		
RI									
SC									
SD									
TN	-								
TX									
บา									,
VT	-								
VA									
WA			····				-		
wv									
wi wi							-		
WY	 				· · · · ·				
PR									

^{*}One (1) foreign investor located in Luxembourg: \$1,000,000.22.